

# DECLARATION FOR UTILITY OR DESIGN

## PATENT APPLICATION

JUL 23 2001

☒ Declaration  
Submitted with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

(37 CFR 1.63)

Attorney Docket Number

9257

First Named Inventor

ROBERT A. SUTHERLAND ET AL

### COMPLETE IF KNOWN

Application Number

09/808,666

Filing Date

March 14, 2001

Group Art Unit

2633

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPTICAL CONVERTER FLEX ASSEMBLIES

the specification of which

☐ is attached hereto  
OR

(Title of the Invention)

☒ was filed on (MM/DD/YYYY)

March 14, 2001

as United States Application Number or PCT International

Application Number

09/808,666

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



Please type a plus sign (+) inside this box → ☐

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PTO/SB/01 (12-97)  
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/805,514	3-12-2001	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Bruce H. Johnsonbaugh	24,982		
John P. Wooldridge	38,725		

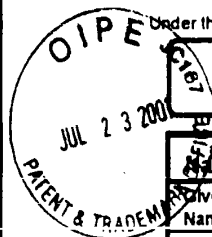
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below

Name	Bruce H. Johnsonbaugh				
Address	Eckhoff, Hoppe, Slick, Mitchell & Anderson				
Address	333 Market Street, Suite 3125				
City	San Francisco	State	CA	ZIP	94105
Country	US	Telephone	415-442-5810	Fax	415-442-5811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Robert A.		Sutherland			
Inventor's Signature				Date	6/25/01
Residence: City	Los Gatos	State	CA	Country	USA
Post Office Address	107 Leewood Ct				
Post Office Address					
City	Los Gatos	State	CA	ZIP	95032
				Country	USA
<input checked="" type="checkbox"/> Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					



## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	James	Middle Initial	S.	Family Name	Sacks	Suffix	
Inventor's Signature	<i>James S. Sacks</i>				Date	6/25/01	
Residence: City	Sunnyvale	State	CA	Country	USA	Citizenship	USA
Post Office Address	928 Maria Lane Apt. D						
Post Office Address							
City	Sunnyvale	State	CA	Zip	94086	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Eric	Middle Initial	B.	Family Name	Grann	Suffix	
Inventor's Signature	<i>E. B. Grann</i>				Date	7/17/01	
Residence: City	San Ramon	State	CA	Country	US	Citizenship	US
Post Office Address	410 Commodore Court						
Post Office Address							
City	San Ramon	State	CA	Zip	94583	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Kenneth	Middle Initial	R.	Family Name	Herrity	Suffix	
Inventor's Signature	<i>Kenneth Herrity</i>				Date	7/17/01	
Residence: City	Milpitas	State	CA	Country	US	Citizenship	US
Post Office Address	120 Dixon Landing Road, #161						
Post Office Address							

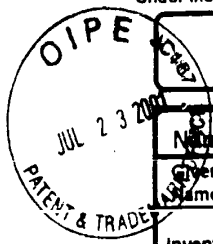
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Jeffrey	Middle Initial	A.	Family Name	Griffis	Suffix	
Inventor's Signature	<i>Jeffrey A. Griffis</i>				Date	06.25.01	
Residence: City	Redwood City	State	CA	Country	US	Citizenship	US
Post Office Address	307 Chelsea Way						
Post Office Address							
City	Redwood City	State	CA	Zip	94061	Country	US
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (8-96)

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>
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Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Frank	Middle Initial	W.	Family Name	Jacobson	Suffix <small>e.g. Jr.</small>	Jr.		
Inventor's Signature						Date	6/25/01		
Residence: City	ANTIOCH	State	CA	Country	USA	Citizenship	US		
Post Office Address	5395 SOUTHWOOD WAY								
Post Office Address									
City	ANTIOCH	State	CA	Zip	94531	Country	USA		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix <small>e.g. Jr.</small>			
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial		Family Name		Suffix <small>e.g. Jr.</small>			
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			

Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial		Family Name		Suffix <small>e.g. Jr.</small>	
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							